

FILE NOTATIONS

Entered in NID File ✓
 Location Map Pinned ✓
 Card Indexed ✓

Checked by Chief
 Approval Letter
 Disapproval Letter

COMPLETION DATA:

Date Well Completed

Location Inspected

Bond released

State or Fee Land

..... WW..... TA.....
 OS..... PA.....

LOGS FILED

Driller's Log.....

Electric Logs (No.)

E..... I..... Dual I Lat..... GR-H..... Micro.....

BHC Sonic GR..... Lat..... MI-L..... Sonic.....

CBLog..... CCLog..... Others.....

MARCH
MAY
JUNE

PRODUCTION
THRU
1982

83 BPD

Will have I.P.
in to me by
Monday 16th
and all other
information

as per phone call
on 5-12-83

mappe,
is getting reports will
send when received.

DS
5-20-82

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*

(Other instructions on reverse side)

Federal U 27359

5. Lease Designation and Serial No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. Type of Well

Oil Well ☒Gas Well ☐Other ☐Single Zone ☐Multiple Zone ☐

2. Name of Operator

Titan Oil Company William Pulsipher by Glade Stubbs (designated)

3. Address of Operator

P. O. Box 33, Virgin, Utah

4. Location of Well (Report location clearly and in accordance with State requirements.)*

At surface

NW SW SEC. 13, T. 41S., R. 12W. 1602' from S.W. Corner of Sec. 13

At proposed prod. zone

1033 from S.W. Corner of Sec. 13-14

1643' FSL & 144' FUL

14. Distance in miles and direction from nearest town or post office*

3 miles from city of Virgin

12. County or Parrish 13. State

Washington County, Utah

15. Distance from proposed*

location to nearest

property or lease line, ft.

(Also to nearest drlg. line, if any)

254' FSL 40 acres

80 acres

17. No. of acres assigned to this well

10 acres

18. Distance from proposed location*

to nearest well, drilling, completed, or applied for, on this lease, ft.

67'

19. Proposed depth

565' GR.

20. Rotary or cable tools

Cable Tool

21. Elevations (Show whether DF, RT, GR, etc.)

3500' Ground Level

22. Approx. date work will start*

January 25, 1978

23.

PROPOSED CASING AND CEMENTING PROGRAM

| Size of Hole | Size of Casing | Weight per Foot | Setting Depth | Quantity of Cement |
|--------------|----------------|-----------------|---------------|--------------------|
| 12" | 12" | 4 wall, 250 | 50' | cement to surface |

Refer to our application of 4-27-77

Re-enter and Re-work #3C Old Faithful shown on our survey

We are now able to produce 10 BOPD

On the same application I requested to Re-drill as 3D as shown on survey map. This will be 67' South of the 3C well to finalize the application

\$10,000.00 Bond filed with Bureau of Land Management, Salt Lake City, Utah
Federal Bond Travelers Indemnity Company, Bond # 42-OE-500-A

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. Glade Stubbs

Signed

Title Designated Operator

Date 1-25-78

(This space for Federal or State office use)

Permit No.

43-053-30032

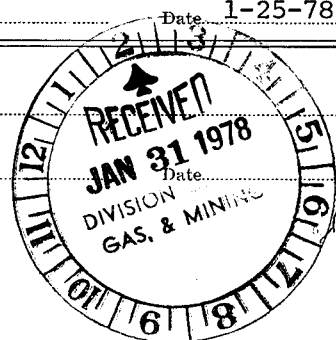
Approval Date

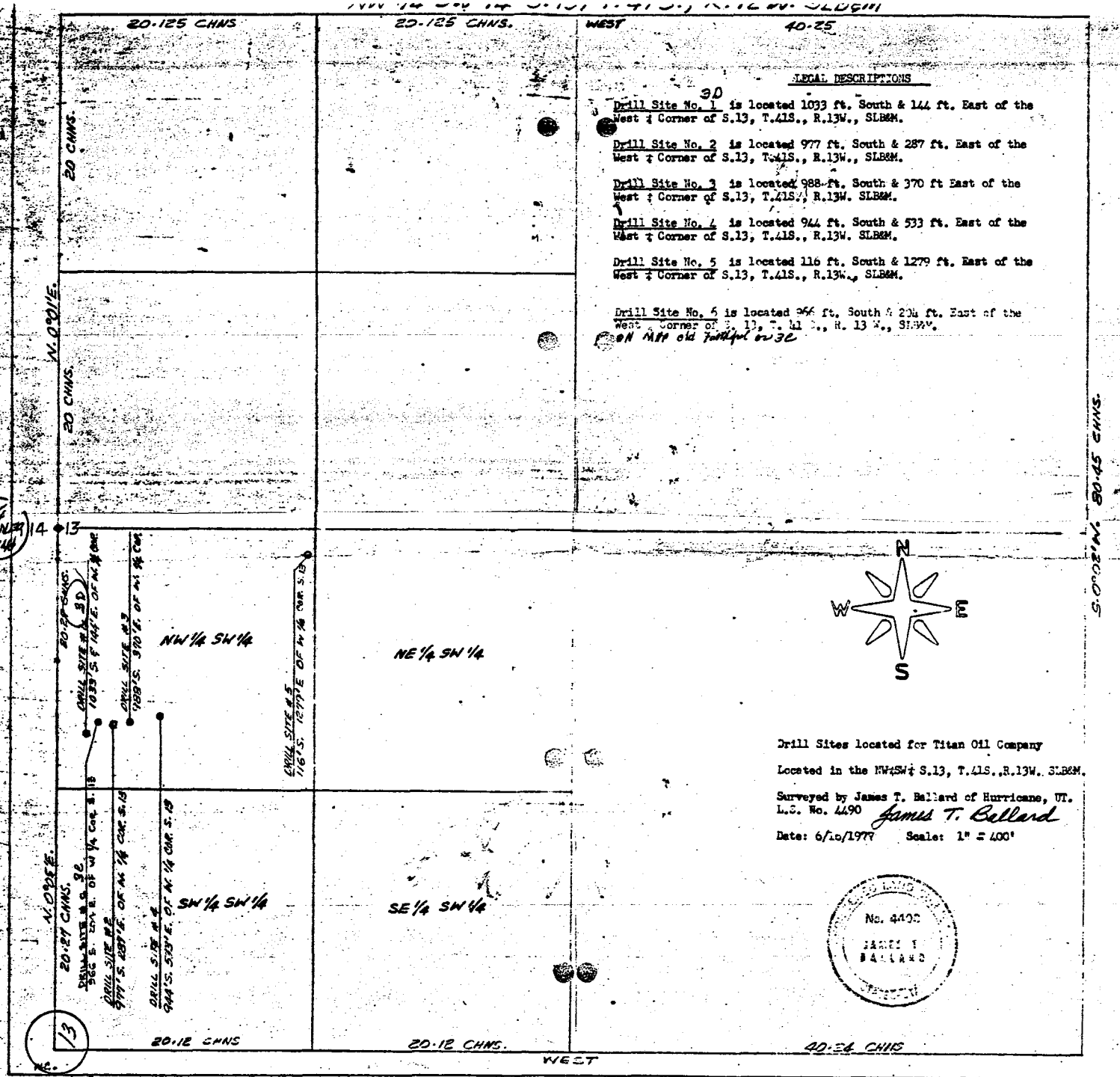
Approved by

Title

Conditions of approval, if any:

*See Instructions On Reverse Side





FOUND CORNER

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

1643' NSL
144' EWL

** FILE NOTATIONS **

Date: Feb. 1-

Operator: Titan Oil Co.

Well No: 3-D

Location: Sec. 13 T. 41S R. 12W County: Washington

File Prepared: ☒

Entered on N.I.D.: ☒

Card Indexed: ☒

Completion Sheet: ☒

API NUMBER: 13-053-30032

CHECKED BY:

Administrative Assistant [Signature]

Remarks:

Petroleum Engineer [Signature]

Remarks:

Director [Signature]

Remarks:

INCLUDE WITHIN APPROVAL LETTER:

Bond Required: ☒

Survey Plat Required: ☐

Order No. ☐

Surface Casing Change ☐
to ☐

Rule C-3(c), Topographic exception/company owns or controls acreage
within a 660' radius of proposed site ☐

O.K. Rule C-3 ☐

O.K. In ☐ Unit ☐

Other:

☒ Letter Written/Approved

February 2, 1978

Titan Oil Company
Box 33
Virgin, Utah

Re: Well No. Federal 3-D
Sec. 13, T. 41 S, R. 12 W,
Washington County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above referred to well is hereby granted in accordance with the General Rules and Regulations and Rules of Practice and Procedure.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

PATRICK L. DRISCOLL - Chief Petroleum Engineer
HOME: 582-7247
OFFICE: 533-5771

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling.

The API number assigned to this well is 48-053-30032.

Very truly yours,

DIVISION OF OIL, GAS, AND MINING

CLEON B. FEIGHT
Director

cc: U.S. Geological Survey

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 42-R1599

Serial No. U27359
assignment in part

LAND OFFICE USE ONLY
New Serial No.

ASSIGNMENT AFFECTING RECORD TITLE
TO OIL AND GAS LEASE

PART I

WILLIAM L. PULSIPHER

WILLIAM L. PULSIPHER

2230 SOUTH 20th EAST

SALT LAKE CITY UTAH

54109

TITAN OIL COMPANY

The undersigned, as owner of **100%** percent of record title of the above-designated oil and gas lease issued effective (date) **February 1, 1975**, hereby transfers and assigns to the assignee shown above, the record title interest in and to such lease as specified below.

2. Describe the lands affected by this assignment (43 CFR 3101 2-3)

**NW/4 NW/4 (40 acres) NW/4 SW/4 (40 acres)
Section 13 T41S R 12 W Salt Lake Base & Meridian**

Bond No. 42-OE-500-A

3. What part of assignor(s) record title interest is being conveyed to assignee? (Give percentage or share) **all**

4. What part of the record title interest is being retained by assignor(s)? **none**

5a. What overriding royalty or production payments is the assignor reserving herein? (See Item 4 of General Instructions; specify percentage.) **none**

b. What overriding royalties or production payments, if any, were previously reserved or conveyed? (Percentage only) **none**

It is agreed that the obligation to pay any overriding royalties or payments out of production of oil created herein, which, when added to overriding royalties or payments out of production previously created and to the royalty payable to the United States, aggregate in excess of 17½ percent, shall be suspended when the average production of oil per well per day averaged on the monthly basis is 15 barrels or less.

I CERTIFY That the statements made herein are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Executed this **25** day of **February**, 1977

Zion Crude Oil Company

P.O. Box 370 Hurricane, Utah

(Assignor's Signature)

84737 ~~8800~~

(Assignor's Address)

Murel Goodell President

Murel Goodell

(City)

(State)

(Zip Code)

Title 18 U.S.C., Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

THE UNITED STATES OF AMERICA

Assignment approved as to the lands described below:

SAME LAND AS ITEM 2

Assignment approved effective **APR 1 1978**

By

Virginia Harrison

(Authorized Officer)

Acting

CHIEF, MINERALS SECTION

MAR 9 1978

(Title)

(Date)

NOTE: This form may be reproduced provided that copies are exact reproductions on one sheet of both sides of this official form in accordance with the provisions of 43 CFR 3106

PART II

ASSIGNEE'S REQUEST FOR APPROVAL OF ASSIGNMENT

A. ASSIGNEE CERTIFIES THAT

1. Assignee is over 21 years of age
2. Assignee is a citizen of the United States
3. Assignee is ☒ Individual ☐ Municipality ☐ Association ☐ Corporation
4. Assignee is the sole party in interest in this assignment (*information as to interests of other parties in this assignment must be furnished as prescribed in Specific Instructions*)
5. Filing fee of \$10 is attached (*see Item 2 of General Instructions*)
6. Assignee's interests, direct and indirect, do not exceed 200,000 acres in oil and gas options, or 246,080 chargeable acres in options and leases in the same state, or 300,000 chargeable acres in leases and options in each leasing district in Alaska.

B. ASSIGNEE AGREES to be bound by the terms and provisions of the lease described here, provided the assignment is approved by the Authorized Officer of the Bureau of Land Management.

C. IT IS HEREBY CERTIFIED That the statements made herein are true, complete, and correct to the best of undersigned's knowledge and belief and are made in good faith.

Executed this 10 day of March, 19 77

William L. Pulsipher
(Assignee's Signature)

NOTARY PUBLIC

2230 South 22nd East, Salt Lake City, Utah
(Address, include zip code) 84109

Title 18 U.S.C., Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

GENERAL INSTRUCTIONS

1. *Use of form* - Use only for assignment of record title interest in oil and gas leases. Do not use for assignments of working or royalty interests, operating agreements, or subleases. An assignment of record title may only cover lands in one lease. If more than one assignment is made out of a lease, file a separate instrument of transfer with each assignment.
2. *Filing and number of copies* - File three (3) completed and manually signed copies in appropriate land office. A \$10 nonrefundable filing fee must accompany assignment. File assignment within ninety (90) days after date of final execution.
3. *Effective date of assignment* - Assignment, if approved, takes effect on the first day of the month following the date of filing of all required papers.
4. *Overriding royalties or payments out of production* - Describe in an accompanying statement any overriding

royalties or payments out of production created by assignment but not set out therein. If payments out of production are reserved by assignor, outline in detail the amount, method of payment, and other pertinent terms.

5. *Effect of Assignment* - Approval of assignment of a definitely described portion of the leased lands creates separate leases. Assignee, upon approval of assignment, becomes lessee of the Government as to the assigned interest and is responsible for complying with all lease terms and conditions, including timely payment of annual rental and maintenance of any required bond; except in the case of assignment of undivided interests, royalties, and operating agreements.

6. A copy of the executed lease, out of which this assignment is made, should be made available to assignee by assignor.

SPECIFIC INSTRUCTIONS

(Items not specified are self-explanatory)

PART I

Item 1 - Type or print plainly, in ink, between and below heavy dots, the assignee's full name and mailing address, including zip code.

PART II

A. Certification of assignee

3. If assignee is an association or partnership, assignee must furnish a certified copy of its articles of association or partnership, with a statement that (a) it is authorized to hold oil and gas leases; (b) that the person executing the assignment is authorized to act on behalf of the organization in such matters; and (c) names and addresses of members controlling more than 10% interest.

If assignee is a corporation, it must submit a statement containing the following information: (a) State in which it was incorporated; (b) that it is authorized to hold oil and gas leases; (c) that officer executing assignment is authorized to act on behalf of the corporation in such matters; and (d) percentage of voting stock and percentage of all stock owned by

aliens or those having addresses outside the United States. If 10 percent or more of the stock of any class is owned or controlled by or on behalf of any one stockholder, a separate showing of his citizenship and holdings must be furnished.

If evidence of qualifications and ownership has previously been furnished as required by the above, reference by serial number of record in which it was filed together with a statement as to any amendments. Qualifications of assignee must be in full compliance with the regulations (43 CFR 3102).

4. *Statement of interests* - Assignee must indicate whether or not he is the sole party in interest in the assignment; if not, assignee must submit, at time assignment is filed, a signed statement giving the names of other interested parties. If there are other parties interested in the assignment, a separate statement must be signed by each and assignee giving the nature and extent of the interest of each, the nature of agreement between them, if oral; and a copy of agreement, if written. All interested parties must furnish evidence of their qualifications to hold such lease interests. Separate statements and written agreements, if any, must be filed no later than fifteen (15) days after filing assignment.

SCOTT M. MATHESON
Governor



OIL, GAS, AND MINING BOARD

GORDON E. HARMSTON
Executive Director,
NATURAL RESOURCES

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING
1588 West North Temple
Salt Lake City, Utah 84116
(801) 533-5771

I. DANIEL STEWART
Chairman

CHARLES R. HENDERSON
JOHN L. BELL
THADIS W. BOX
C. RAY JUVELIN

CLEON B. FEIGHT
Director

August 22, 1978

Titan Oil Company
Box 33
Virgin, Utah

Re: Well No. Federal 3-D
Sec. 13, T. 41S, R. 12W
Washington County, Utah
March 1978-July 1978

Gentlemen:

Our records indicate that you have not filed a Monthly Report of Operations for the months indicated above on the subject well.

Rule C-22, General Rules and Regulations and Rules of Practice and Procedure, requires that said reports be filed on or before the sixteenth (16) day of the succeeding month. This report may be filed on Form OGC-1b, (U.S. Geological Survey Form 9-331) "Sundry Notices and Reports on Wells", or on company forms containing substantially the same information. We are enclosing forms for your convenience.

Your prompt attention to the above will be greatly appreciated.

Very truly yours,

DIVISION OF OIL, GAS, & MINING

Tammy Edge
Typist

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR Titan Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 68 South Main., Suite 800, Salt Lake City, Utah 84111 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41W., R.12W., SLB&M; Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, CR, etc.) | 9. WELL NO. 3D |
| | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA T.41S., R.12W., SLB&M Section 13 |
| | | 12. COUNTY OR PARISH 13. STATE |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

5 days of pumping. Pump down for cleaning - sanding up.

18. I hereby certify that the foregoing is true and correct

SIGNED X

W. L. Robinson

TITLE X

President

DATE X

4-19-82

(This space for Federal or State office use)

466-7942

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR Titan Oil Compnay | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 68 South Main., Suite 800, Salt Lake City, Utah 84111 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Sec 13: NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3D |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 13 T.41S., R.12W., SLB&M |
| | | 12. COUNTY OR PARISH 13. STATE |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☒

CHANGE PLANS ☐

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Shut in for pump repair. No pumping.

18. I hereby certify that the foregoing is true and correct

SIGNED X

W. L. Partridge

TITLE X

President

DATE X

4-19-82

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(See instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR Titan Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 68 S. Main, Suite 800, Salt Lake City, UT 84111 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Section 13: NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 9. WELL NO. 3D |
| | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 13 T.41S., R.12W., SLB&M |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Twenty-two days of pumping.

RECEIVED
JUL 27 1982
DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED *X H. L. Phillips*

TITLE

President

DATE

7-22-82

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|---|
| 1. <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR x Titan Oil Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR x 68 So. Main #200 - Salt Lake City, Utah 84101 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T. 41S. R. 12W., SLE&M, Section 13: NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 9. WELL NO. 3D |
| | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 13 T. 41S. R. 12W. SLE&M |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

NO PUMPING DURING JULY

18. I hereby certify that the foregoing is true and correct

SIGNED x *W. L. Putsyph*

TITLE x President

DATE x 8-18-82

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

5. LEASE DESIGNATION AND SERIAL NO.

71-027359-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

3D

10. FIELD AND POOL, OR WILDCAT

Virgin Oil Field

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREAT.41S., R.12W., SLB&M
Section 13

12. COUNTY OR PARISH

Washington

13. STATE

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

x TITAN OIL INC.

3. ADDRESS OF OPERATOR

x 68 South Main-Suite 200, Salt Lake City, Utah 84101

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

Virgin Oil Field, Washington County, Utah
T.41S., R.12W., SLB&M, Section 13: NW $\frac{1}{4}$ SW $\frac{1}{4}$

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping in August

RECEIVED

OCT 01 1982

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

x *W. L. Puley*TITLE^x

President

DATE^x 9-27-82

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR
Titan Oil Inc.
3. ADDRESS OF OPERATOR
68 So. Main-#200, Salt Lake City, Utah 84101
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

DIVISION OF
OIL, GAS & MINING

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Loss of 3 bbls due to evaporation of Naphtha and other distillates in Hot weather.

No pumping in August.

MINERAL INVESTMENT SERVICE
ROYALTY & LEASES SECTION
RECEIVED

SEP 30 1982

CALPER, WYOMING

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED W. L. Ruppel TITLE President DATE 9-27-82

(This space for Federal or State office use)

APPROVED BY _____ DATE _____
CONDITIONS OF _____



STATE OF UTAH
NATURAL RESOURCES & ENERGY
Oil, Gas & Mining

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Cleon B. Feight, Division Director

4241 State Office Building • Salt Lake City, UT 84114 • 801-533-5771

March 17, 1983

Titan Oil Company
68 South Main, Suite # 200
Salt Lake City, Utah 84101

Re: Well No. 3-D
Sec. 13, T. 41S, R. 12W.
Washington County, Utah

Gentlemen:

This letter is to advise you that the Well Completion or Recompletion Report and Log for the above mentioned well is due and have not been filed with this office as required by our rules and regulations.

Please complete the enclosed Form OGC-3, in duplicate, and forward them to this office as soon as possible.

We will be happy to acknowledge receipt of response to this notice if you will include an extra copy of the transmittal letter with a place for our signature, and a self addressed envelope for the return. Such acknowledgement should avoid unnecessary mailing of a firm second notice from our agency.

Your prompt attention to the above will be greatly appreciated.

Respectfully,

DIVISION OF OIL, GAS AND MINING

Cari Furse
Well Records Specialist

CF/cf
Enclosure

May 11, 1983

State of Utah
Natural Resources and Energy
Division of Oil, Gas and Mining
4241 State Office Building
Salt Lake City, Utah 84114

Attention: Cari Furse

Gentlemen:

Re: Well No. 3-D
Sec. 13, T. 41S, R. 12W
Washington County, Utah

In accordance with your request, we
are enclosing Form OGC-3, in duplicate, covering the
above mentioned well.

Sincerely,

TITAN OIL INC.

W. L. Pulsipher
W. L. Pulsipher
68 South Main, Suite 200
Salt Lake City, Utah 84101

WLP/mf
Encl.

Received by Division of Oil, Gas and Mining
Date: 5-12-83
By: *C. Furse*

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

| 37. SUMMARY OF POROUS ZONES: | | | | 38. GEOLOGIC MARKERS | | |
|--|-----|--------|-----------------------------|----------------------|-------------|-------------------------|
| SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CURSION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES | | | | | | |
| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | NAME | MEAS. DEPTH | TOP TRUE VERT. DEPTH |
| | | | | | | |

May 11, 1983

State of Utah
Natural Resources and Energy
Division of Oil, Gas and Mining
4241 State Office Building
Salt Lake City, Utah 84114

Attention: Cari Furse

Gentlemen:

In accordance with your letter of
October 22, 1982, and our telephone conversations,
we are enclosing the information you requested.

Please contact us if we can help you
further.

Sincerely,

TITAN OIL INC.

W. L. Pulsipher *DM*

W. L. Pulsipher
68 South Main, Suite 200
Salt Lake City, Utah 84101

WLP/mf

Encls.

RECEIVED
MAY 12 1983

DIVISION OF
OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
 (Other instructions on
 reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
 Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR Titan Oil Inc. 3. ADDRESS OF OPERATOR 68 So. Main-#200, Salt Lake City, Utah 84101 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME 9. WELL NO. 3C, 3D, 4 & 10 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 13 T.41S., R.12W., SLB&M 12. COUNTY OR PARISH 13. STATE Washington Utah |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☒

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping in the Month of March 1983. Down for pump and well repair and cleaning.

RECEIVED

MAY 18 1983

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNEDX

W. L. Halpern

TITLE X

President

DATE X

5-11-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

231

SUBMIT IN TRIPLICATE*
(other instructions on
reverse side)

| | | |
|--|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.) | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 2. NAME OF OPERATOR TITAN OIL INC. | | 7. UNIT AGREEMENT NAME |
| 3. ADDRESS OF OPERATOR 68 So. Main - #200, Salt Lake City, Utah 84101 | | 8. FARM OR LEASE NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 9. WELL NO. 3C, 3D, 4 & 10 |
| 14. PERMIT NO. | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 11. SEC., T., R., M., OR SLE. AND SURVEY OR AREA Sec. 13 T.41S., R.12W., SLB&M |
| 12. COUNTY OR PARISH Washington | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | | |

NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping in the month of April 198e. Down for pump and well repair and cleaning

Pumping has been temporarily halted due to lack of market and low prices which makes long distance shipping infeasible.

RECEIVED

JUN 13 1983

DIVISION OF
OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED X W. L. Puley

TITLE President

DATE 6-7-83

(This space for Federal or State office use)

APPROVED BY _____
 CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | |
|---|--|
| 1. OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> WELL WELL OTHER | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR Titan Oil Inc. | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 68 South Main-#200, Salt Lake City, Utah 84101 | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 9. WELL NO. 3D, 4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13 T.41S., R.12W., SLB&M |
| | 12. COUNTY OR PARISH Washington |
| | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping in the month of May 1983. Down for pump and well repair and cleaning.
Pumping has been temporarily halted due to lack of market and low prices which makes long distance shipping infeasible.

RECEIVED
JUL 17 1983DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED X *W. A. Pugh* TITLE X President

DATE X 7-13-83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR Titan Oil Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 68 So. Main-200, Salt Lake City, Utah 84101 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 9. WELL NO. 3C 3D 4 10 |
| | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13 T.41S., R.12W., SLB&M |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping in the month of June 1983. Down for pump and well repair and cleaning.

Pumping has been temporarily halted due to lack of market and low prices which makes long distance shipping infeasible.

RECEIVED
AUG 01 1983
DIVISION OF
OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED W. L. P. [Signature] TITLE President

DATE 8-1-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

7
RECEIVED
SEP 01 1983

August 29, 1983

DIVISION OF
OIL, GAS & MINING

Mr. Norm Stout
State of Utah
Natural Resources and Energy
Division of Oil, Gas and Mining
4241 State Office Building
Salt Lake City, Utah 84111

Dear Norm:

We have been checking all possible sources and as near as we can tell, Well 3-D was activated by Zion Crude Oil (Mr. Goodell who has since passed away).

When we received the documents in transfer, no information was forwarded as to the date started, completed or depth, however, they were operating the well at that time.

We do have the following information:

Depth 580
Pumping Depth 524

We hope this additional information will be helpful.

Sincerely,

TITAN OIL INC.

W. L. Pulsipher

W. L. Pulsipher
68 South Main-Suite 200
Salt Lake City, Utah 84101

WLP/mf

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug in or to abandon a reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | | |
|--|--|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A | |
| 2. NAME OF OPERATOR X Titan Oil Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR X 68 So Main-#200, Salt Lake City, Utah | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements* See also space 17 below.) At surface Virgin Oil Field, Washington County, Utah T.41S., R.12W., SLB&M, Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ | | 8. FARM OR LEASE NAME | |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, 4, 10 | |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S., R.12W., SLB&M | |
| | | 12. COUNTY OR PARISH WASHINGTON | |
| | | 13. STATE UTAH | |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (Other) <input checked="" type="checkbox"/> | | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity during the month of July 1983. Down for pump and well cleaning.

Pumping has been temporarily halted due to lack of market and low prices which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct

SIGNED X

W. L. Pulsipher

TITLE X

President

DATE X

9-6-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR

X Titan Oil Inc.

3. ADDRESS OF OPERATOR

X 68 So Main-#200, Salt Lake City, Utah 84101

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

5. LEASE

71-027359-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

3C, 3D, 4, 10

10. FIELD OR WILDCAT NAME

11. SEC., T., R., M., OR BLK. AND SURVEY OR

AREA Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$
T.41S., R.12W., SLB&M

12. COUNTY OR PARISH

WASHINGTON

13. STATE

UTAH

14. API NO.

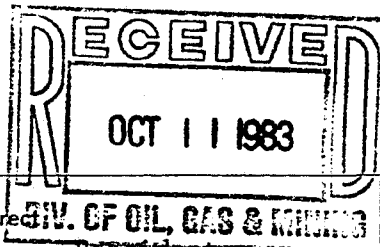
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the month of August 1983. Down for pump repair and well cleaning.

Pumping has been temporarily halted due to lack of market and low prices which makes long distance shipping infeasible.



Subsurface Safety Valve: Manu. and Type

Set @ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED X *T. L. P. [Signature]* TITLE X

President

DATE X

10-7-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR

X Titan Oil Inc.

3. ADDRESS OF OPERATOR

X 68 So. Main, Salt Lake City, Utah

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

5. LEASE

71-027359-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

3C, 3D 4, 10

10. FIELD OR WILDCAT NAME

VIRGIN OIL FIELD

11. SEC., T., R., M., OR BLK. AND SURVEY OR

AREA Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$

T. 41S., R. 12W., S1B&M

12. COUNTY OR PARISH 13. STATE

WASHINGTON UTAH

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

RECEIVED
Report results of multiple completion or zone change on Form 9-330.
NOV 10 1983

DIVISION OF

OIL, GAS & MINING

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the Month of September 1983. Down for pump repair and well cleaning.

Pumping has been temporarily halted due to lack of market and low prices, which makes long distance shipping infeasible.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED X W. L. Rudolph TITLE X Pres. DATE X 11-11-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
X Titan Oil Inc.
3. ADDRESS OF OPERATOR
X 68 So. Main-Salt Lake City, Utah 84101
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: | |
|--------------------------|-------------------------------------|-----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | | <input type="checkbox"/> |
| REPAIR WELL | <input checked="" type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
| (other) | | | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the month of October 1983. Down for pump repair and well cleaning.

Pumping has been temporarily halted due to lack of market and low prices, which makes long distance shipping infeasible.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED X W. L. Kulsperger TITLE X President DATE X 11-30-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

DEC 5 1983
DIVISION OF
OIL, GAS & MINING

5. LEASE NO. 71-027359-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
9. WELL NO. 3C, 3D, 4, 10
10. FIELD OR WILDCAT NAME VIRGIN OIL FIELD
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S., R.12W., SLB&M
12. COUNTY OR PARISH Washington 13. STATE Utah
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(For instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|--|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR X Titan Oil Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR X 68 So. Main - #200, Salt Lake City, Utah 84101 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Section 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether OF, AT, OR, etc.) | 9. WELL NO. 3C, 4 and 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH 13. STATE Washington Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

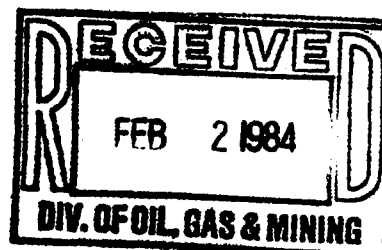
| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

No pumping activity in the month of December 1983. Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to lack of market and low prices, which makes long distance shipping infeasible.



18. I hereby certify that the foregoing is true and correct.

SIGNED W. J. K. [Signature] TITLE X President DATE Jan. 16, 1984

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Section 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether pr, rt, or, etc.) | 9. WELL NO. 3C, 3D, Federal 4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☒

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

No pumping activities in the month of January 1984. Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

RECEIVED
MAR 10 1984

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

William Pulsipher
WILLIAM PULSIPHER

TITLE President

DATE Feb. 24, 1984

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

COMMENTS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

April 2, 1984

Ms. Claudia Jones
State of Utah
Department of Natural Resources
Division of Oil Gas and Mining
4241 State Office Building
Salt Lake City, Utah 84114

Dear Claudia:

I am enclosing a list of our wells and the information you requested - well number, API number, location and lease number.

If I can help you further, please feel free to contact me. Thanks for your patience.

Sincerely,

TITAN OIL INC.

Maxine

Maxine O. Freeman
2121 South 1100 East - Suite K
Salt Lake City, Utah 84106

MOF/a

Encl.

RECEIVED

APR 3 1984

DIVISION OF
OIL, GAS & MINING

| <u>Well No.</u> | <u>A.P.I. No.</u> | <u>Location</u> | <u>Lease No.</u> |
|-------------------|-------------------|--|------------------|
| 3 C | 43-053-30018 | Sec. 13 T41S R12W 1,750 ft FSL 230 ft FWL | U-27359-A |
| 3 D | 43-053-30032 | Sec. 13 T41S R12W 1,675 ft NSL 220 ft EWL | U-27359-A |
| Fed. #4 (Walkin) | 43-053-30021 | Sec. 13 T41S R12W 1,095 ft FNL 1,119 ft FWL | U-27359-A |
| 10 | 43-053-16537 | Sec. 13 T41S R12W 200 ft SNL 1,120 ft EWL | U-27359-A |
| Titan State #1 | 43-053-30003 | Sec. 36 T40S R13W 1,930 ft FEL 660 ft FNL | 17253 |
| 5M-7-11 (Wildcat) | 43-053-30045 | Sec. 16 T42S R11W 1,632.72 ft FWL 1,457.07 ft FSL | ML 29784 |

RECEIVED

APR 3 1934

DIVISION OF
OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

(Other instructions on
reverse side)

3

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-027359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY INC | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Section. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D, Federal #4, 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☒

CHANGE PLANS

☐

(Other)

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activities in the month of February 1984. Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

RECEIVED

APR 20 1984

DIVISION OF OIL
GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

William P. Phipps
William Phipps

TITLE

President

DATE

March 28, 1984

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | |
|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY INC | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | 12. COUNTY OR PARISH Washington |
| | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the month of March 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

RECEIVED

MAY 10 1984

DIVISION OF OIL
GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED William Pulsipher TITLE President

DATE 4-25-84

(This space for Federal or State office use)

APPROVED BY _____
CONDITION OF APPROVAL IF ANY:

TITLE _____ DATE _____

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | | | |
|---------------------|-------------------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> |
| REPAIR WELL | <input checked="" type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> |
| (Other) | | | |

SUBSEQUENT REPORT OF:

| | | | |
|-----------------------|--------------------------|-----------------|--------------------------|
| WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| (Other) | | | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

No pumping activity in the month of April 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

RECEIVED

JUN 7 1984

DIVISION OF OIL
GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED William Pulsipher TITLE President

DATE May 22, 1984

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

COMMENTS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|---|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether OF, XT, GR, etc.) | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the month of May 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

RECEIVED

JUL 3 1984

DIVISION OF OIL
GAS & MINING

18. I hereby certify that the foregoing is true and correct.

SIGNED William Pulsipher TITLE President DATE 6-20-84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, XT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

RECEIVED

AUG 1 1984

DIVISION OF OIL
GAS & MINING

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

No pumping activity in the month of June 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct

SIGNED William Pulsipher TITLE PresidentDATE July 16, 1984

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

(See instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | |
|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | 12. COUNTY OR PARISH Washington |
| | 13. STATE Utah |

RECEIVED

AUG 31 1984

DIVISION OF OIL
GAS & MINING

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

No pumping activity in the month of July 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct

SIGNED William Pulsipher TITLE President

DATE 8-24-1984

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

RECEIVED IN TRIPLICATE
(Instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* | | 12. COUNTY OR PARISH Washington 13. STATE Utah |

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

No pumping activity in the month of August 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct.

SIGNED

William Pulsipher

TITLE

President

DATE 9-10-84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether OF, RT, GR, etc.) | 9. WELL NO. 3C, (3D), Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR SLK. AND SURVEY OR 1884 Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | (Other) <input type="checkbox"/> |
| (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | | | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

No pumping activity in the month of September 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct.

SIGNED William Pulsipher TITLE President

DATE 10-10-1984

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Sec. 13: NW$\frac{1}{4}$NW$\frac{1}{4}$ NW$\frac{1}{4}$SW$\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D, Federal #4 & 1 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR SLK. AND SURVEY OR AREA Sec. 13; NW$\frac{1}{4}$NW$\frac{1}{4}$ NW$\frac{1}{4}$SW$\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (Other) <input type="checkbox"/> | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

No pumping activity in the month of November 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct.

SIGNED William Pulsipher TITLE President

DATE Dec. 20, 1984

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 71-27359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Sec. 13: NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. Washington County, Utah | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 9. WELL NO. 3C, (3D) Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) _____ | (Other) _____ |
| (Other) _____ | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

No pumping activity in the month of December 1984.

Pumps are down for cleaning and repair.

Pumping has been temporarily halted due to the lack of markets and low prices, which makes long distance shipping infeasible.

18. I hereby certify that the foregoing is true and correct.

SIGNED

William Pulsipher
William Pulsipher

TITLE President

DATE 1-21-1985

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 30 3D, Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | | | |
|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | | | |
|-----------------------|--------------------------|-----------------|--------------------------|
| WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIER

TITLE President

DATE Jan. 23, 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | | |
|---|--|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 7. UNIT AGREEMENT NAME | |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 8. FARM OR LEASE N/MS | |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 9. WELL NO. 3C, 3D Federal #4 & 10 | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD | |
| 14. PERMIT NO. | | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$, NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. | |
| | | 12. COUNTY OR PARISH 13. STATE Washington Utah | |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|---|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | FULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The tubing, pumps and rods were pulled on wells 3C, 3D and 10 to prepare wells for cleaning and new equipment.

18. I hereby certify that the foregoing is true and correct

SIGNED

WILLIAM PULSIPHER

TITLE President

DATE Feb. 20, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$, NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☒

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The tubing, pump and rods were pulled in well Federal #4 to repair the well. PVC surface casing was set in the wells to help accommodate the new pumps and pumping was started.

18. I hereby certify that the foregoing is true and correct

SIGNED

WILLIAM PULSIPHER

TITLE President

DATE Mar. 19, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES RECEIVED
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
APR 22 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

| |
|--|
| 5. LEASE |
| U 27359-A |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| ----- |
| 7. UNIT AGREEMENT NAME |
| ----- |
| 8. FARM OR LEASE NAME |
| ----- |
| 9. WELL NO. |
| #3D |
| 10. FIELD OR WILDCAT NAME |
| Virgin Field |
| 11. SEC. T, R., M., OR BLK. AND SURVEY OR AREA |
| Sec 13, T41S, R12W |
| SLM, Virgin Quadrangle |
| 12. COUNTY OR PARISH |
| Washington |
| 13. STATE |
| Utah |
| 14. API NO. |
| ---- |
| 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| 3599 GR |

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR
Empire Capital, Ltd.

3. ADDRESS OF OPERATOR
P.O.Box 747, St. George, Utah 84770

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1010 FNL 240 FEL SW 1/4 Sec. 13
AT TOP PROD. INTERVAL: As Above
AT TOTAL DEPTH: As Above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Run 5" plastic liner and install ribbon pump

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

April 23, 1985-Clean out hole with bailer

April 26, 1985-Install 5" plastic casing

April 30, 1985-Install Orresco Ribbon Pump

NOTE: all dates are proposed

Subsurface Safety Valve: Manu. and Type N/A Set @ FL

18. I hereby certify that the foregoing is true and correct

SIGNED James H. Vane TITLE President DATE April 16, 1985

(This space for Federal or State office use)

APPROVED BY TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

FILE NO.

171-027359-A

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

MAY 02 1985

| | | | |
|--|--|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 7. UNIT AGREEMENT NAME | |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 8. FARM OR LEASE NAME | |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 9. WELL NO. 3C, 3D, Federal #4 & 10 | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD | |
| 14. PERMIT NO. | | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$, NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. | | 12. COUNTY OR PARISH Washington | |
| | | 13. STATE Utah | |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☒

CHANGE PLANS

☐

(Other)

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Pumping of wells.

18. I hereby certify that the foregoing is true and correct

SIGNED

WILLIAM PULSIPHER

TITLE President

DATE April 18, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Norman H. Bangerter, Governor
Dee C. Hansen, Executive Director
Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

April 30, 1985

Titan Oil Company
2121 South 1100 East, Suite K
Salt Lake City, Utah 84106

Gentlemen:

Re: Well No.: 3D - Sec. 13, T. 41S., R. 12W.,
Washington County, Utan - API #43-053-30020

According to information received by this office, the above referenced well is no longer operated by your company. We have not received the proper notification concerning this change.

Please submit a "Sundry Notice", form OGC-1b, with the name, address and phone number of the new operator and the date the change became effective. If there are any other wells affected, please submit a separte sundry for each well. We have enclosed forms for your convenience.

Sincerely,

Pam Kenna
Well Records Specialist

Enclosure

cc: Dianne R. Nielson
Ronald J. Firth
John R. Baza
File

0161S/2

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$, NW $\frac{1}{4}$ NW T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☒

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Test pumping of wells.

18. I hereby certify that the foregoing is true and correct

SIGNED

WILLIAM PULSIPHER

TITLE President

DATE May 22, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR TITAN OIL COMPANY | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 2121 South 1100 East Suite K Salt Lake City, Utah 84106 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$, NW $\frac{1}{4}$ N T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☒

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Pumping of wells.

18. I hereby certify that the foregoing is true and correct

SIGNED

William Pulsipher
WILLIAM PULSIPHER

TITLE President

DATE June 21, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3D |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | | | |
|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | FULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | | | |
|-----------------------------|-------------------------------------|-----------------|-------------------------------------|
| WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| (Other) <u>Change Owner</u> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Change Ownership

From: TITAN OIL COMPANY
2121 South 1100 East Suite K
Salt Lake City, Utah 84106

To: 5M, INCORPORATED
P.O. Box 752
Hurricane, Utah 84737

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE July 30, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Preparations to reopen field with pumping and well repair.

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIER

TITLE President

DATE Sept. 3, 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUPPLEMENTAL TRIPPLICATE*
(Enter instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

18.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
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PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair is being performed on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE Sept. 25, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR 5M, INCORPORATED 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME 9. WELL NO. 3C, 3D, Federal #4 & 10 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. 12. COUNTY OR PARISH 13. STATE Washington Utah |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
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☐

PULL OR ALTER CASING

☐
☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE Oct. 23, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT **TRIPPLICATE***
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|---|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR 5M, INCORPORATED 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME 9. WELL NO. 3C, 3D, Federal #4 & 10 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. 12. COUNTY OR PARISH Washington 13. STATE Utah |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED DEC 02 1985 DIVISION OF OIL GAS & MINING </div> |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

☐
☐
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MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIERTITLE PresidentDATE Nov. 25, 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

5M, INCORPORATED

3. ADDRESS OF OPERATOR

P.O. Box 752 Hurricane, Utah 84737 DIVISION OF OIL

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

5. LEASE DESIGNATION AND SERIAL NO.

171-027359-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

3C, 3D, Federal #4 & 10

10. FIELD AND POOL, OR WILDCAT

VIRGIN OIL FIELD

11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$
T.41S. R.12W. SLB&M.

12. COUNTY OR PARISH

13. STATE

Washington

Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Well cleaning and repair temporarily halted on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE

President

DATE Dec. 18, 1985

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

RECEIVED
MAR 03 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIERTITLE PresidentDATE February 26, 1986

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

| | |
|--|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | FULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE March 24, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT **TRIPPLICATE***
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | |
|---|---|
| <p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR 5M, INCORPORATED</p> <p>3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface</p> | <p>5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME</p> <p>9. WELL NO. 3C, 3D, Federal #4 & 10</p> <p>10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW$\frac{1}{4}$SW$\frac{1}{4}$ NW$\frac{1}{4}$NW$\frac{1}{4}$ T.41S. R.12W. SLB&M.</p> <p>12. COUNTY OR PARISH Washington</p> <p>13. STATE Utah</p> |
| <p>14. PERMIT NO.</p> | <p>15. ELEVATIONS (Show whether DF, RT, OR, etc.)</p> |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| <p>(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</p> | | | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.
We are cleaning well sites and lease area.

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIER

TITLE President

DATE April 21, 1986

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | 9. WELL NO. 3C, 3D Federal #4 & 10 |
| | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Well cleaning and repair temporarily halted on this lease.

We are cleaning well sites and lease area.

RECEIVED
MAY 30 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

Jerry Glazier
JERRY GLAZIER

TITLE President

DATE May 27, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

070308

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|--|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. 43.053.30032 | | 9. WELL NO. 3C, 3D Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

We are cleaning well sites and lease area.

RECEIVED
JUN 20 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE June 24, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

081118

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | | |
|---|--|--|-------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A | |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME | |
| 14. PERMIT NO. 43-053-30032 | | 9. WELL NO. 3C, 3D, Federal #4 & 10 | |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD | |
| | | 11. SEC., T., R., M., OR BLK. AND SUBJECT OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. | |
| | | 12. COUNTY OR PARISH Washington | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

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|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

SUBSEQUENT REPORT OF:

| | | | |
|-----------------------|--------------------------|-----------------|--------------------------|
| WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| (Other) | <input type="checkbox"/> | | <input type="checkbox"/> |

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well cleaning and repair temporarily halted on this lease.

We are cleaning well sites and lease area.

RECEIVED

JUL 30 1986

DIVISION OF OIL
GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED JERRY GLAZIERTITLE PresidentDATE July 28, 1986

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT TRIPLICATE*
(Other instructions on
reverse side)

080425

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|---|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR 5M, INCORPORATED 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME 9. WELL NO. 3C, (3D) Federal #4 & 10 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. 12. COUNTY OR PARISH 13. STATE Washington Utah |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, CR, etc.) | |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

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MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☒
☐
☐
☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

We set up on wells #3D and 10 to try to clean them but we had the wrong equipment to complete what we wanted. We will bring in other equipment.

RECEIVED

SEP 02 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED Jerry Glazier
JERRY GLAZIER

TITLE President

DATE August 25, 1986

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

100111

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|---|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 171-027359-A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. Box 752 Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. 43.053.30032 | | 9. WELL NO. 3C, 3D, Federal #4 & 10 |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN OIL FIELD |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13; NW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$ T.41S. R.12W. SLB&M. |
| | | 12. COUNTY OR PARISH Washington |
| | | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Shut in.

RECEIVED
SEP 29 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

JERRY GLAZIER

TITLE President

DATE Sept. 24, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | | |
|---|--|---|-------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. U-27359-A | |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR P.O. Box 752, Hurricane, Utah 84737 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$, Section 13, T. 41 S., R. 12 W., Washington County, Utah | | 8. FARM OR LEASE NAME | |
| 14. PERMIT NO. 4305330032 | | 9. WELL NO. Walkins (4) & 10, 3B, 3C, 3D. | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 10. FIELD AND POOL, OR WILDCAT Virgin Oil Field | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA | |
| | | 12. COUNTY OR PARISH Washington | 13. STATE Utah |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDISING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Ref: BLM letter 3160 (U-922) dated May 23, 1989 Attn: Robert A. Henricks
Notice of Intent: Proposal to plug and abandon open well.Method of plugging. ~~delete~~

- (1) Fill the open hole with Bentonite Clay to be obtained from Bentonite Quarry owned by 5M, Inc.
- (2) Surface 5-10 feet of hole to be cemented solid, with the appropriate 4 inch steel pipe extending 4 feet above the surface with well number and location marked thereon.

See Attached Stipulations.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Secretary

DATE June 21, 1989

(This space for Federal or State office use)

APPROVED BY

TITLE

DISTRICT MANAGER

DATE

7/14/89

CONDITIONS OF APPROVAL, IF ANY:

PHONE CONVERSATION DOCUMENTATION FORM

Route original/copy to:

~~XX~~ Well File (S) SEE ATTACHMENTS☐ Suspense
(Return Date) _____
(To - Initials) _____☐ Other(Location) Sec____Twp____Rng____
(API No.) _____

1. Date of Phone Call: 6-27-91 Time: 1:06

2. DOGM Employee (name) LISHA ROMERO (Initiated Call ~~XX~~)
Talked to:Name THERESA THOMPSON (Initiated Call ☐) - Phone No. (801)539-4047

of (Company/Organization) BLM/S.L. OFFICE

3. Topic of Conversation: ATTACHED NOTICES OF INTENT TO PA WELLS. APPROVED BY THE
BLM EFFECTIVE 9-14-89. (REQUESTED SUBSEQUENT APPROVED NOTICES ON 6-24-91)4. Highlights of Conversation: THERESA CONFIRMED THAT THE WELLS HAVE ALL BEEN
PLUGGED, HOWEVER THE BLM DOES NOT HAVE SUBSEQUENT PA NOTICES. THEIR INSPECTOR
VERIFIED THE WELLS PLUGGED AND THE BLM IS USING 9-14-89 AS THE PA DATE.
THEIR INSPECTORS DO NOT FILE INSPECTION REPORTS SIMILAR TO DOGM'S INSPECTION
REPORTS. THERESA MENTIONED THAT THERE WERE A COUPLE OF WELLS THAT WERE NOT
COMPLETED (PLUGGED) SATISFACTORILY AND THE BLM WAS NEGOTIATING WITH 5M TO PROPERLY
PLUG THE WELLS, HOWEVER THE BLM'S RECORDS ARE LISTING THE WELLS AS PA'D EFF
9-14-89. (THEY DO NOT HAVE AN EXACT DATE OF PLUGGING)

CC: DON STALEY

JIM THOMPSON

VICKI CARNEY

PHONE CONVERSATION DOCUMENTATION FORM

Route original/copy to:

☒ Well File As shown on
attached Prod. Report.
 (Location) Sec Twp Rng
 (API No.)

☐ Suspense
 (Return Date)
 (To - Initials)

☒ Other
 - VLC (FYI)
 - Prod. File (5m)
 - orig: compliance file

1. Date of Phone Call: 3-30-90 Time: 9:00 AM

2. DOGM Employee (name) Don Staley (Initiated Call ☒
 Talked to:
 Name Teresa Thompson (Initiated Call ☐ - Phone No. () 539-4047
 of (Company/Organization) BLM - SLC

3. Topic of Conversation: 5m wells (Washington County)

4. Highlights of Conversation: Per Teresa, leases ~~have~~ ^{have} been
terminated because the BLM requested that 5m
perform wellbore tests to prove that wells
were non-productive, and 5m did not
respond. ~~5m~~ 5m did submit plugging
proposals for the wells but the BLM said
they were inadequate and sent them back
unapproved. Teresa said 5m is still the bonded
operator of the wells and ~~she~~ is responsible
for all work and paper work on the wells
until they are properly plugged.

MINERAL RESOURCE
Oil & Mining

Example, 3 Triad Center, Suite 350, Salt Lake City, Ut
(538-5340)

Page 1 of 1

MONTHLY OIL AND GAS PRODUCTION REPORT

Operator name and address:

• 5M, INCORPORATED
P O BOX 752
HURRICANE UT 84737
ATTN: JERRY GLAZIER

/ 89

LEASE # TYPE

| Well Name | Producing Zone | | |
|-------------------------------|----------------|-----------|-----|
| API Number | Entity | Location | |
| 5M #1 | MNKP | U-10843 | FED |
| ✓ 4305330034 02565 41S 12W 14 | | | |
| 5M #2 | MNKP | U-10844 | FED |
| ✓ 4305330035 02565 41S 12W 13 | | | |
| 5M #3 | MNKP | U-10844-B | FED |
| ✓ 4305330036 02565 41S 12W 13 | | | |
| 5M #4 | MNKP | U-12310 | FED |
| ✓ 4305330038 02565 41S 11W 7 | | | |
| FEDERAL #10 | MNKP | U-27359A | FED |
| ✓ 4305316537 08131 41S 12W 13 | | | |
| FEDERAL 3B | | U-27359A | FED |
| ✓ 4305320547 08131 41S 12W 13 | | | |
| 5S #3C | MNKP | U-27359 | FED |
| ✓ 4305330018 08131 41S 12W 13 | | | |
| WALKIN K#4 | MNKP | U-27359 | FED |
| ✓ 4305330020 08131 41S 12W 13 | | | |
| 3D | MNKP | U-27359 | FED |
| ✓ 4305330032 08131 41S 12W 13 | | | |

TC

Comments (attach separate sheet if necessary)

I have reviewed this report and certify the information to be accurate and complete.

Date

Authorized signature

Telephone

PLEASE COMPLETE FORMS IN BLACK INK

Division of Oil, Gas and Mining
PHONE CONVERSATION DOCUMENTATION FORM

orig - compliance file

Route original/copy to:

☒ **Well File** As Listed
 (Location) Sec Twp Rng
 (API No.)

☐ **Suspense**
 (Return Date)
 (To - Initials)

☒ **Other**
SLC
Prod. File

1. Date of Phone Call: 4-4-90 Time: 8:40AM

2. DOGM Employee (name) Steve Schneider (Initiated Call ☒)
 Talked to:

Name Teresa Thompson (Initiated Call ☐) - Phone No. () 539-4047
 of (Company/Organization) BLM - SLC Office

3. Topic of Conversation: ^{Fed.}
A Prodtn Reports received on 5M since 4/89.

4. Highlights of Conversation: The BLM-SLC office no longer receives the actual prodtn report from the operator → NMS now does. Their office can check the data reflected in the federal computer:

| <u>Well</u> | <u>Lease</u> | <u>Last Report</u> | <u>Prodtn Reported</u> |
|--------------------|--------------|--------------------|------------------------|
| 5M #1 | U-10843 | 5/89 | 0 |
| 5M #2 | U-10844 | 5/89 | 0 |
| 5M #3 | U-10844B | 5/89 | 0 |
| 5M #4 | U-12310 | 5/89 | 0 |
| Fed #10, Fed 3B | U-27359A | 5/89-11/89 | 0's |
| 3D, #3C, Walkin #4 | U-27359 | 5/89-11/89 | 0's |

Per Teresa, the federal reg's require prodtn to be reported until 3 months after plugging; thus, they haven't met the fed rule. As previously discussed with our division, termination of leases has occurred due to lack of production by operator.

SLS



RECEIVED
APR 16 1990

DIVISION OF
OIL, GAS & MINING

5M, INC., P.O. BOX 752, HURRICANE, UTAH 84737 (801) 635-4473

April 11, 1990

STATE OF UTAH
Division of Oil, Gas and Mining
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180

Attn: Ron Firth

✓ RE: Lease Terminations.

Dear Ron:

Enclosed are the Decisions terminating several leases which were held by 5M, Incorporated which I said that I would get to you.

Should you need additional information, or have further questions, please contact this office.

Very Sincerely,

JOSEPH N. IPSON, Engineering

Enclosures:

| OIL AND GAS | |
|-------------|-------|
| DRN | ✓ WJF |
| JRB | GLH |
| DTS | SLS |
| | RSP |
| | |
| MICROFILM | |
| FILE | |

→ oil & gas stuff:

*I'm not aware of this.
Did anyone speak with
Mr. Ipson. Re: lease termination?*

RECEIVED JUN 12 1989

Bureau of Land Management
Utah State Office
324 South State, Suite 301
Salt Lake City, Utah 84111-2303

3100
U-27359-A
(U-942)

JUN 7 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

William L. Pulsipher
2230 South 22nd East
Salt Lake City, Utah 84109

DECISION

Federal 10 (43-053-16537) DTS
Fed 3B (43-053-26547)
K&S 3C (43-053-30018)
WALKIN K#4 (43-053-30020)
Oil and Gas Lease
U-27359-A 3D (43-053-30032)

Lease Terminated

Oil and gas lease U-27359-A was issued effective August 1, 1974 for a five-year term ending July 31, 1979 and for so long thereafter as oil or gas is produced in paying quantities.

The Chief, Branch of Fluid Minerals, advised by letter on or about February 15, 1989, that the operator of the lease was required to initiate bona fide efforts to reestablish production in paying quantities. Sixty days from the receipt of that letter was required to initiate efforts.

This office has been advised that to date no action has been taken to meet the above requirements as allowed under 43 CFR 3107.2-2.

Accordingly, the lease term is exhausted and declared terminated effective April 22, 1989.

Settlement of royalties or rentals due or payable must be made to Minerals Management Service, if not previously done. Bonds must remain in full force and effect until final abandonment of all wells on the lease has been approved, and the account is settled.

The following lands were embraced in this lease:

T. 41 S., R. 12 W., SLM, Utah
Sec. 13, NW $\frac{1}{4}$ NW $\frac{1}{4}$, NW $\frac{1}{4}$ SW $\frac{1}{4}$.

Containing 80.00 acres
Washington County

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN DUPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

| | | |
|--|--|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. LEASE DESIGNATION AND SERIAL NO. UTU27359A |
| 2. NAME OF OPERATOR 5M, INCORPORATED | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR | | 7. UNIT AGREEMENT NAME |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW $\frac{1}{4}$ NW $\frac{1}{4}$ & NW $\frac{1}{4}$ SW $\frac{1}{4}$ Section 13, T.41S. R.12W. SLB&M. | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. | | 9. WELL NO. |
| 15. ELEVATIONS (Show whether DF, RT, OR, etc.) | | 10. FIELD AND POOL, OR WILDCAT VIRGIN |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data | | 11. SEC., T., R., M., OR BLK. AND SUBDIVISION OR AREA NW $\frac{1}{4}$ NW $\frac{1}{4}$ & NW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec. 13, T41S R12W |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work).* | | 12. COUNTY OR PARISH 13. STATE Washington Utah |

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☒CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work).*

| API No. | Entity | Location | Status |
|------------------------|--------|------------|-------------------|
| Federal #10 4305316537 | 08131 | 41S 12W 13 | Plugged & Abandon |
| Federal 3B 4305320547 | 08131 | 41S 12W 13 | Plugged & Abandon |
| KGS #3C 4305330018 | 08131 | 41S 12W 13 | Plugged & Abandon |
| Walkin #4 4305330020 | 08131 | 41S 12W 13 | Plugged & Abandon |
| 3D 4305330032 | 08131 | 41S 12W 13 | Plugged & Abandon |

RECEIVED

FEB 19 1992

DIVISION OF
OIL GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED _____

TITLE _____

President *Jimmy L. Hays*

DATE _____

Feb. 14, 1992

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

41 S 12W 13

42-053-30032